

04-05-01

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PTO/SB/05 (11-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

| | |
|------------------------|---|
| Attorney Docket No. | 020269-000100US |
| First Inventor | Kodikunnathukulangara Sividasan |
| Title | HEAD SUSPENSION ASSEMBLY FOR MAGNETIC DISK DRIVES |
| Express Mail Label No. | EO054315215US |

APPLICATION ELEMENTS

See MPEP chapter 600 concerning design patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 14]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the invention
 - Brief Summary of the invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 8]
[Total Pages 2]
5. Oath or Declaration [Total Pages 2]
 - a. ☒ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 CFR 1.63 (d))
(for a continuation/divisional with Box 18 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☒ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ paper (number of pages)
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATIONS PARTS

9. ☒ Assignment Papers (cover sheet & document(s)) ✓
10. ☐ 37 C.F.R. §3.73(b) Statement ☒ Power of Attorney (when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. ☒ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

- ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)
- Prior application information: Examiner _____

of prior application No: _____ / _____
Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label 20350
(Insert Customer No. or Attach bar code label here)

or ☐ Correspondence address below

| | | | | | |
|---------|------------------------------------|-----------|----------------|----------|----------------|
| Name | Townsend and Townsend and Crew LLP | | | | |
| Address | | | | | |
| City | | State | | Zip Code | |
| Country | | Telephone | (303) 571-4000 | Fax | (303) 571-4321 |

| | | | |
|-------------------|----------------|-----------------------------------|---------|
| Name (Print/Type) | Darin J. Gibby | Registration No. (Attorney/Agent) | 38,464 |
| Signature | | Date | 3/29/01 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.
DE 7036777 v1

09/826173
04/04/01

PATENT APPLICATION SERIAL NO. _____

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE
FEE RECORD SHEET

04/09/2001 JADD01 00000014 201430 09826173

| | |
|-----------|-----------|
| 01 FC:201 | 355.00 CH |
| 02 FC:203 | 36.00 CH |

PTO-1556
(5/87)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF:

Kodikkunnathukulangara Sividasan

Filing Date: April 4, 2001

For: HEAD SUSPENSION ASSEMBLY FOR MAGNETIC DISK DRIVES

BOX PATENT APPLICATION

Assistant Commissioner for Patents

Washington, D.C. 20231

Sir:

CERTIFICATE OF EXPRESS MAILING

"Express Mail" Mailing Label No. ET054315215US

Date of Deposit: April 4, 2001

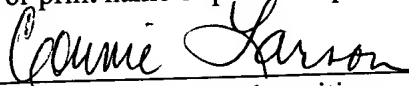
I hereby certify that the following attached items:

1. Utility Patent Application Transmittal and Fee Transmittal
2. Application Data Sheet
3. Certified copy of priority document
4. Declaration; Assignment with Recordation; and Power of Attorney
5. Patent Application

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. 1.10 on the date indicated above and is addressed to the Assistant Commissioner of Patents, Box PCT, Washington, D.C. 20231

Connie Larson

Type or print name of person depositing



Signature of person depositing

04/04/01



jc962 U.S. PTO

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 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 467

| Complete if Known | |
|----------------------|----------------------------------|
| Application Number | |
| Filing Date | |
| First Named Inventor | Kodikkunnathukulangara Sivadasan |
| Examiner Name | |
| Group Art Unit | |
| Attorney Docket No. | 020269-000100US |

| METHOD OF PAYMENT (check one) | | FEE CALCULATION (continued) | |
|---|------------------------------------|--|-----------------------|
| 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: | | 3. ADDITIONAL FEES | |
| Deposit Account Number | 20-1430 | Fee Code | Fee (\$) |
| Deposit Account Name | Townsend and Townsend and Crew LLP | Large Entity Fee (\$) | Small Entity Fee (\$) |
| <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 | | Fee Description | Fee Paid |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | 105 | 130 |
| 2. <input type="checkbox"/> Payment Enclosed: | | 127 | 50 |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other | | 139 | 130 |
| | | 147 | 2,520 |
| | | 112 | 920* |
| | | 113 | 1,840* |
| | | 115 | 110 |
| | | 116 | 390 |
| | | 117 | 890 |
| | | 118 | 1,390 |
| | | 128 | 1,890 |
| | | 119 | 310 |
| | | 120 | 310 |
| | | 121 | 270 |
| | | 138 | 1,510 |
| | | 140 | 110 |
| | | 141 | 1,240 |
| | | 142 | 1,240 |
| | | 143 | 440 |
| | | 144 | 600 |
| | | 122 | 130 |
| | | 123 | 50 |
| | | 126 | 180 |
| | | 581 | 40 |
| | | 146 | 710 |
| | | 149 | 710 |
| | | 179 | 710 |
| | | 169 | 900 |
| | | Other fee (specify) _____ | |
| | | *Reduced by Basic Filing Fee Paid | |
| | | SUBTOTAL (3) (\$) | |
| | | 40 | |
| | | The Commissioner is authorized to charge any additional fees to the above noted Deposit Account. | |

| SUBMITTED BY | | Complete (if applicable) | |
|-------------------|----------------|---------------------------------|----------------|
| Name (Print/Type) | Darin J. Gibby | Registration No. Attorney/Agent | 38,464 |
| Signature | | Telephone | (303) 571-4000 |
| | | Date | 3/29/01 |

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